STATEMENT OF ORGANIZATION TION COMMITTEES AND PARTY COMMITTEES (See Reverse Side For Instructions) Political Action Committee Party Committee This is a (check one) Amended Statement Initial Statement This is an (check one) COMMITTEE (PLEASE TYPE OR PRINT) Mailing Address (Street, City, State, Zip Code) Business Telephone 185 - 589 - 2-190 Houston, Manhattan, K CHAIRPERSON Home Telephone Name (185) 539 4386 uzanne W. (Mailing Address (Street, City, State, Zip Code) Business Telephone 208 Houston Manhattan KS 66502 (785)587 - 2170TREASURER Name Home Telephone (785) 539 4386 Suzanne W. Otto Mailing Address (Street, City, State, Zip Code) Business Telephone Houston, Manhattan, KS 66502 (185)587-2170 AFFILIATED OR CONNECTED ORGANIZATIONS Name lanhattan - Ogden K-NEA Mailing Address (Street, City, State, Zip Code) Manhattan, KS 66502 If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors. SIGNATURE: "I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor." (Signature of Chairperson) Rev.2000 Governmental Ethics Commission